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# Benefits Administration Training



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# MS Teams Live Event

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Microsoft Teams



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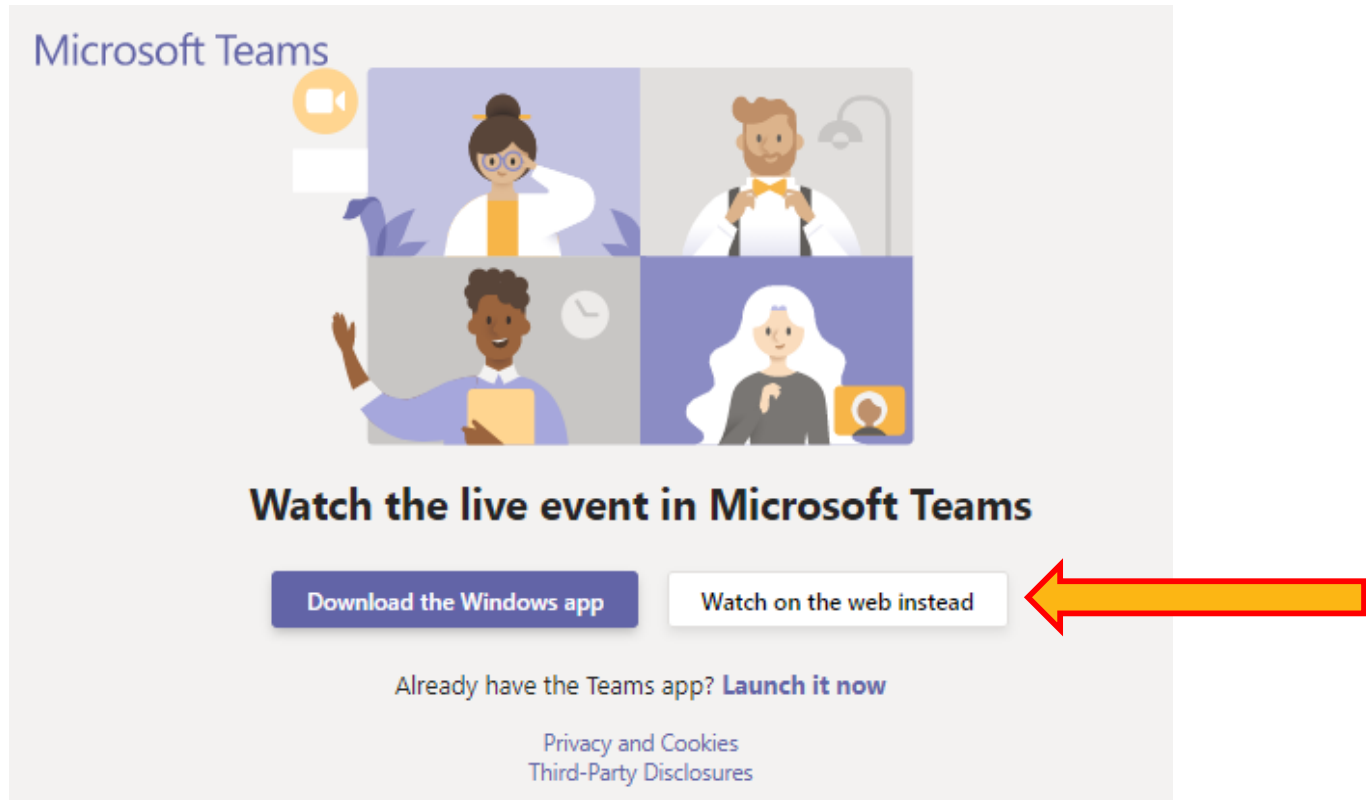
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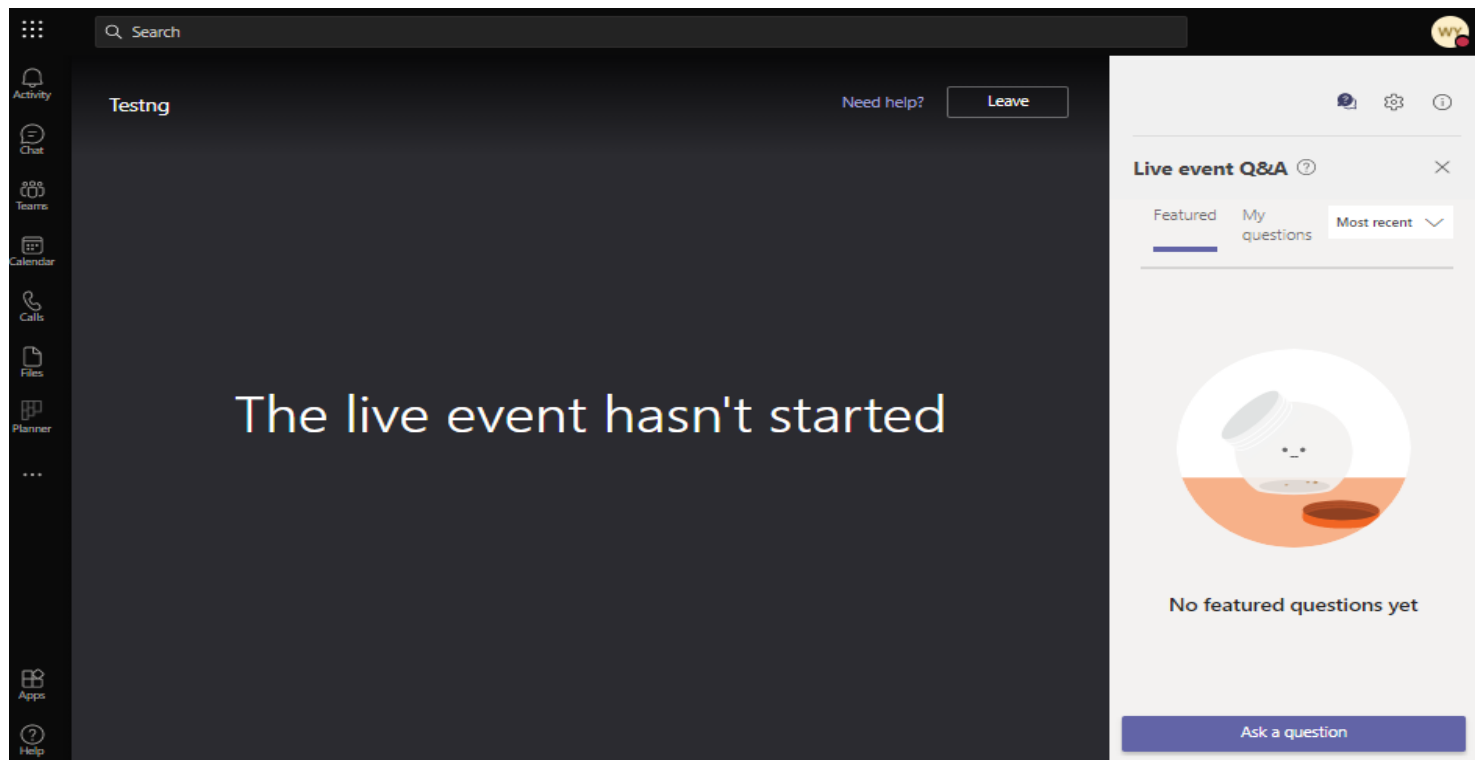
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# MS Teams Live Event

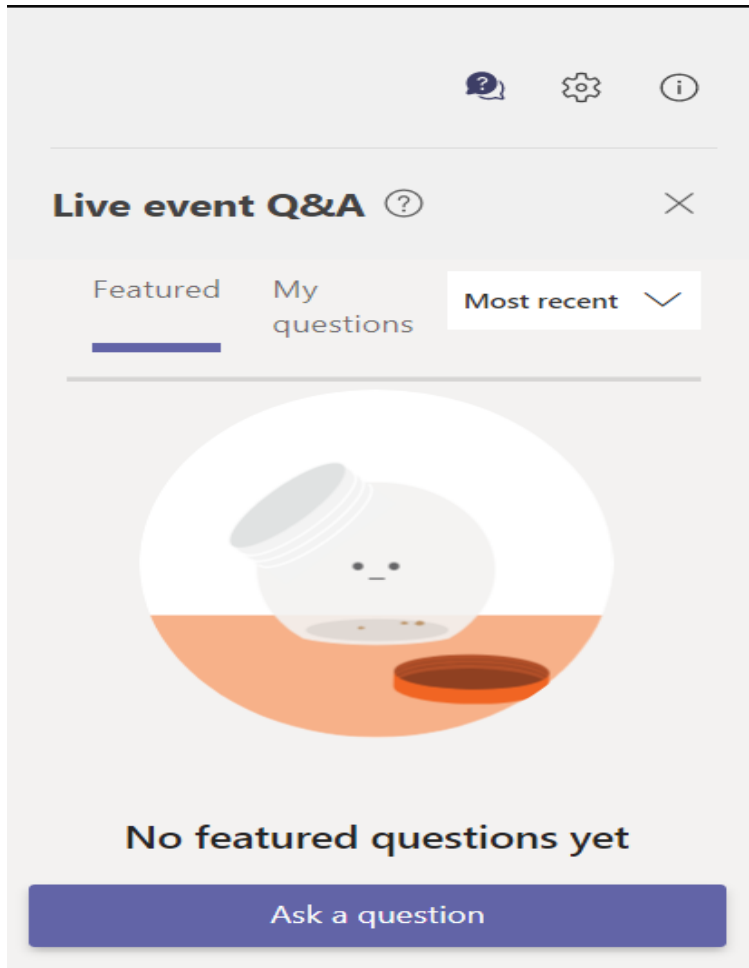
- Select Watch on the web instead



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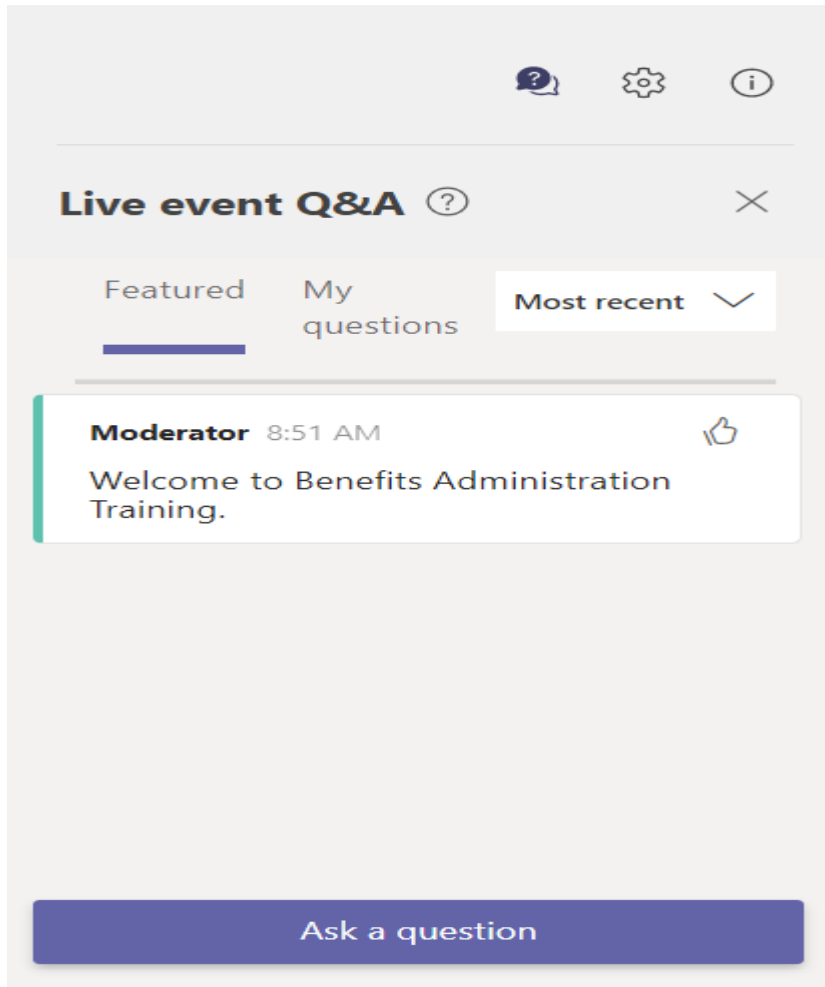


# MS Teams Live Event



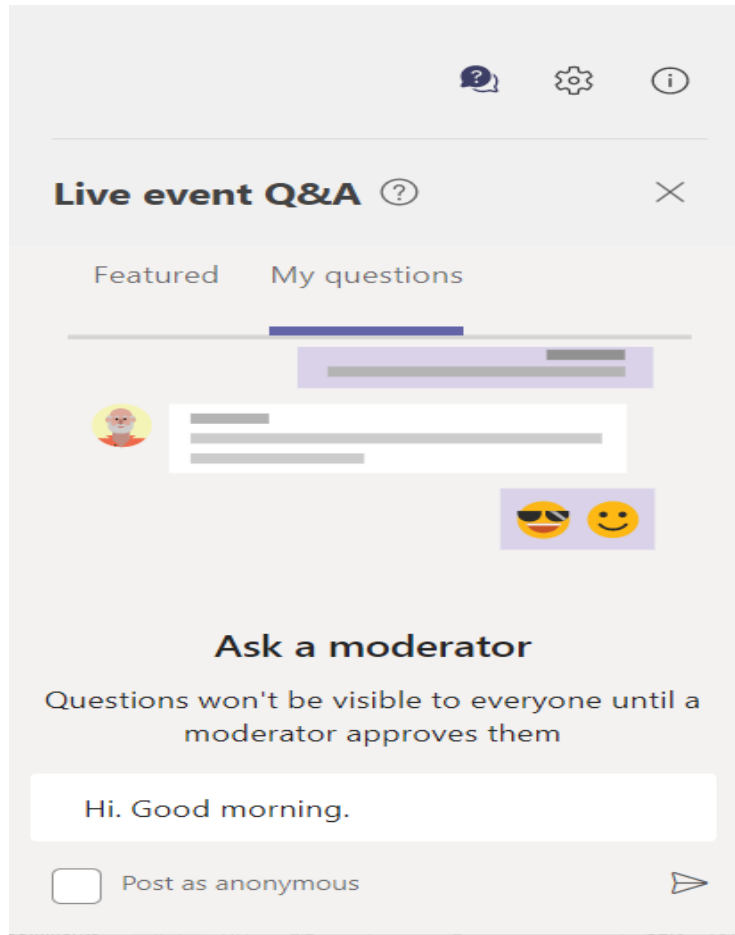
- **The live event Q&A** allows you to communicate to the presenters.
- **The Featured** section are announcements and responses from the presenters.
- To ask a question, select the **Ask a question bar**

# MS Teams Live Event



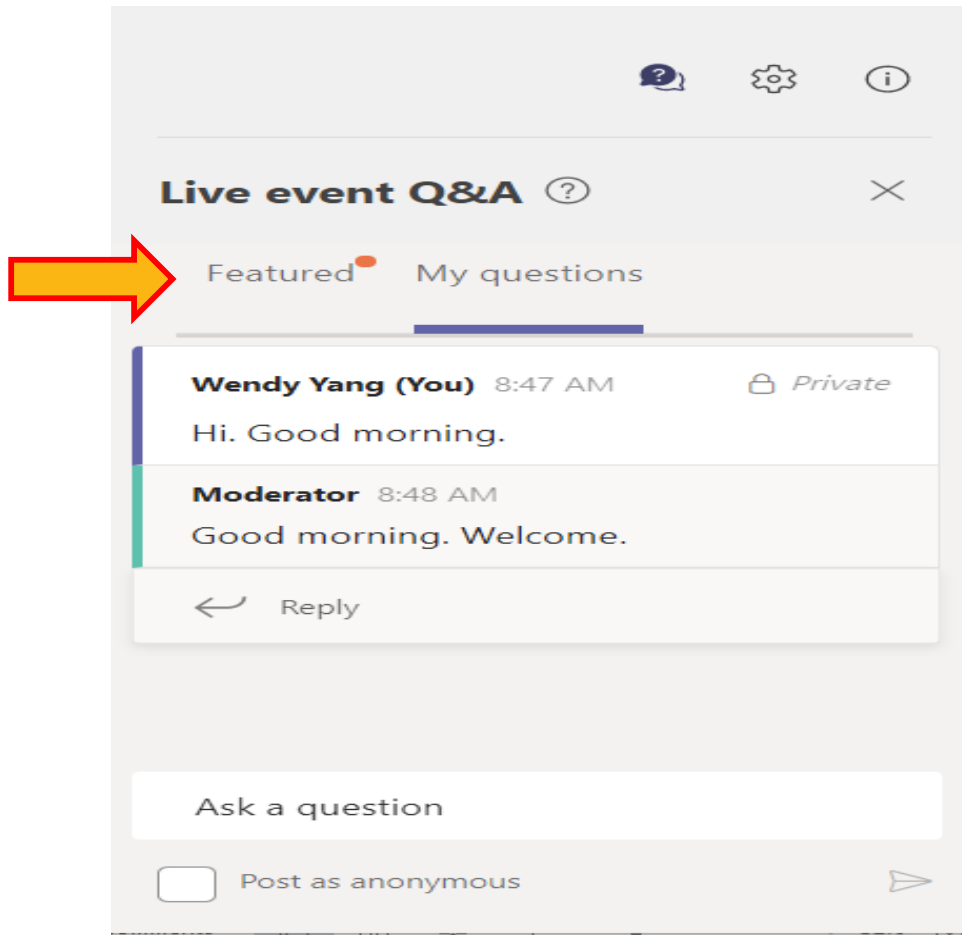
- ***The Featured*** section are announcements from presenters as well as responses to your questions.

# MS Teams Live Event



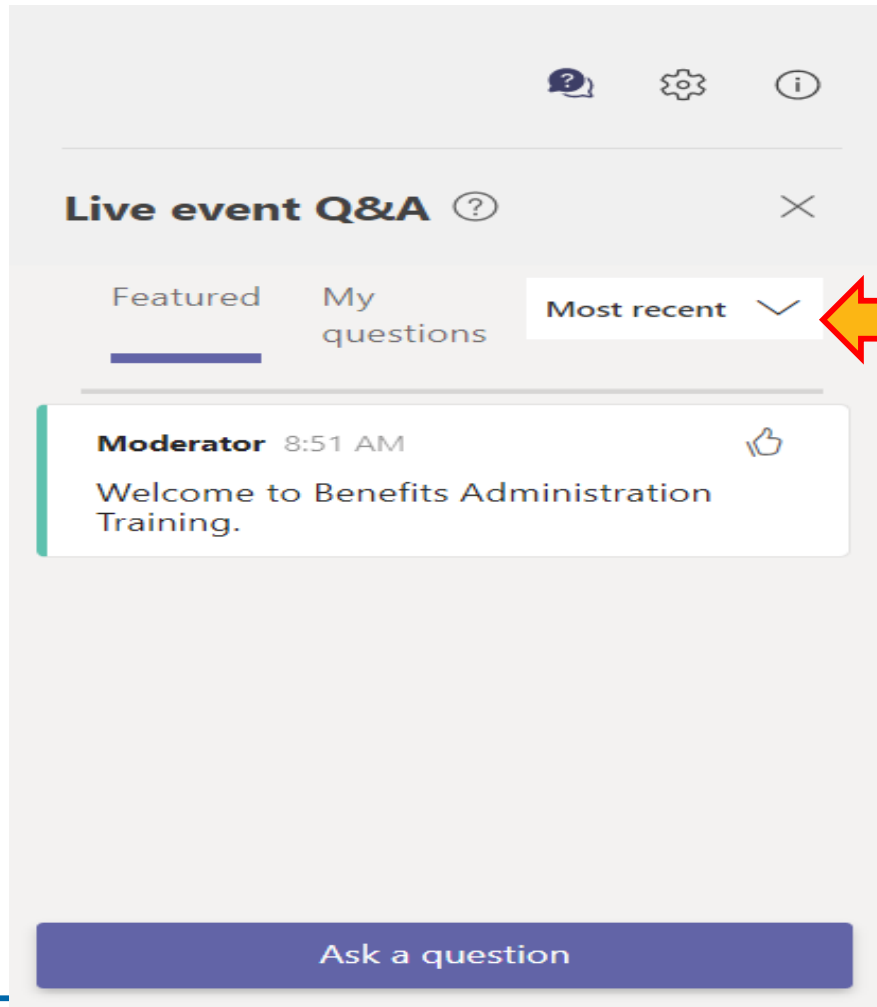
- The ***My questions*** section are the questions that you submit to the presenters. To ask a question, enter your question and click on the send icon

# MS Teams Live Event



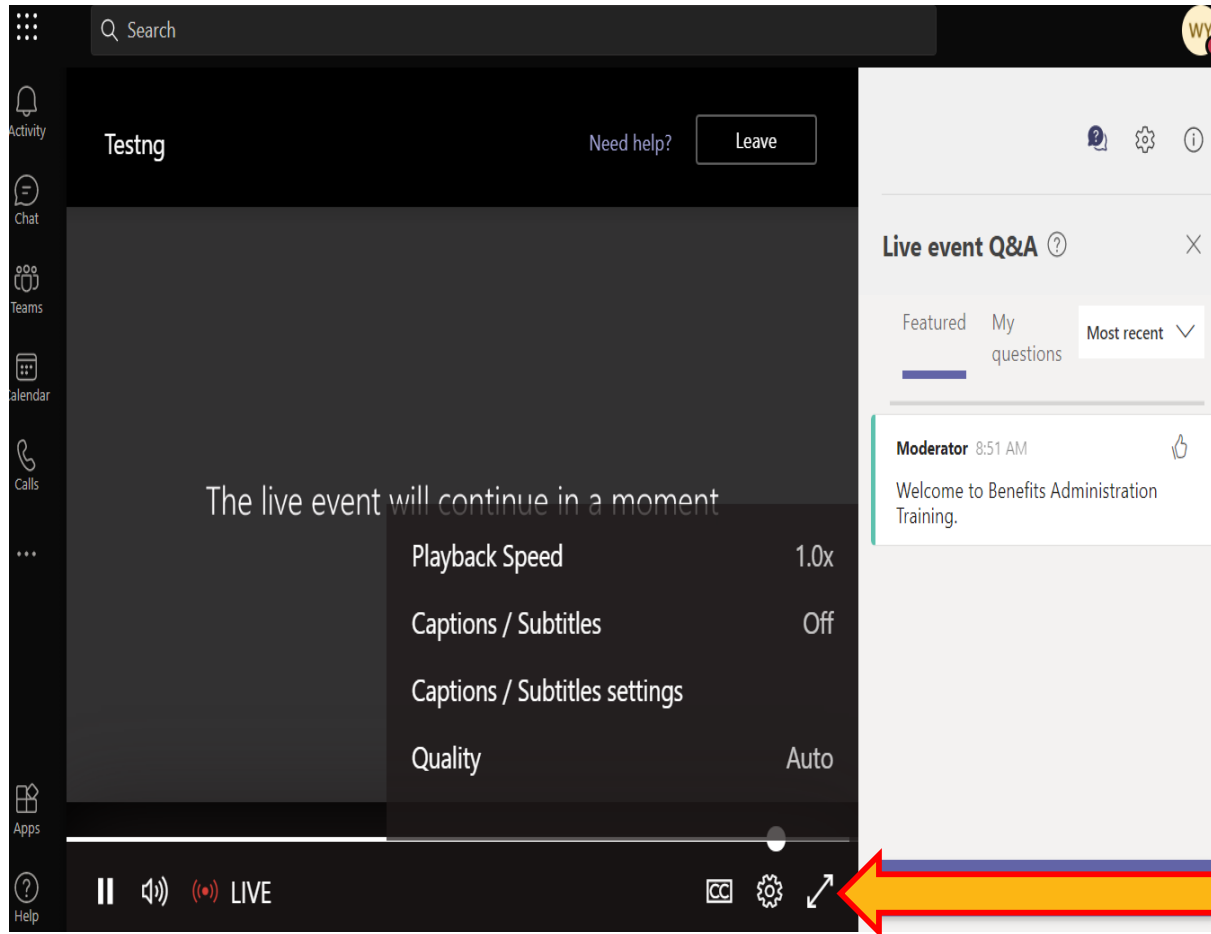
- When a presenter responds to your question, you will receive a response as shown in our ***My questions*** section. The orange circle identifies a new announcement.

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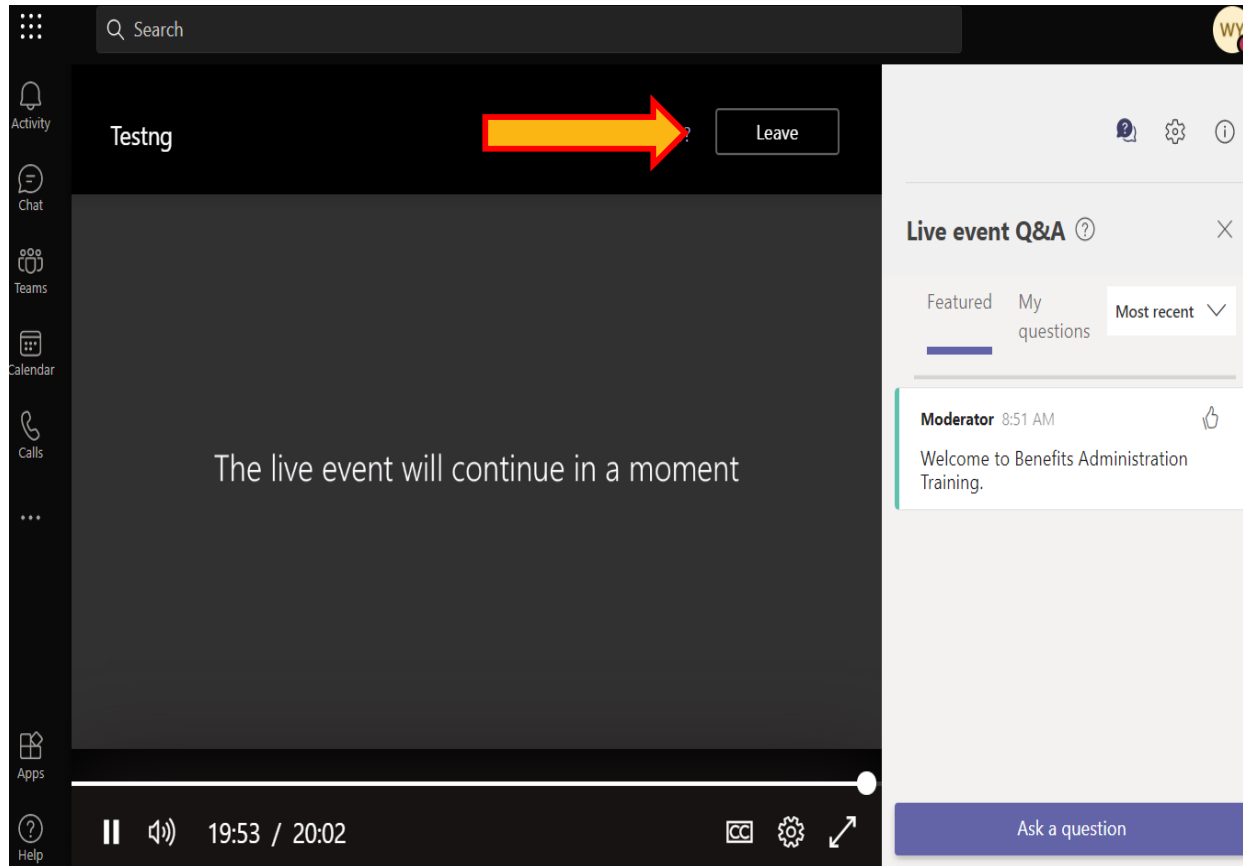
- The Most recent section show the most recent communication.

# MS Teams Live Event



- To turn on closed captions (CC), select the CC icon on the bottom right of your screen to turn the CC on or off. You can also select the tool icon to access the closed caption as well.

# MS Teams Live Event



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# Health Benefits



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# Learning Objectives

- Describe the HR Professional's role in health eligibility, enrollment, and re-verification
- Locate and identify needed rules, procedures, and information
- Make determinations of eligibility

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# Role of the HR Professional

Your Role is Essential:

- Provide accurate information to employees on eligibility requirements and locating health policy resources.
- Ensure that only eligible employees and dependents are enrolled.

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# Role of the HR Professional, 2

- Process enrollments timely
- Retain all required documentation in OPF
- Proactively monitor continued eligibility of employees and their dependents, including parent-child relationship (PCR) dependents.

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# There's a Lot to Know

- Resources
- Eligibility
- my|CalPERS
- Availability of plans in your area (PPO/HMO/EPO)

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# Know the Rules

- Government Code §22750–22944 -  
The Public Employees' Medical &  
Hospital Care Act (PEMHCA)
- CA Code of Regulations §599.500–  
599.517

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# Know the Rules, 2

- CalPERS Circular Letters
- CalHR Health Policy Statement
- State Collective Bargaining Contracts

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# Why is all this important?

- Rising health benefit costs are a leading cause of anemic pay raises
- You'll be a better resource for employees
- Ensure that we only enroll eligible employees and dependents

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# CalPERS Resources

Web site—[www.calpers.ca.gov](http://www.calpers.ca.gov)

- Health Plan Web site links
- Health Plan Evidence of Coverage and Summary of Benefits and Coverage
- State Health Benefits Guide
- Employer Training Classes
- myCalPERS Student Guides

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# Eligibility

- Based on appointment tenure, time base, and duration
  - Special Rules for:
    - Permanent Intermittents
    - Seasonal Firefighters (BU8)

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# Eligible Employees

- Permanent Full-Time
- Permanent Part-Time (half-time or more)
- Permanent Intermittent
  - Must be credited with at least 480 paid hours in a 6-month control period
  - To continue benefits, must be credited with at least 480 paid hours in a control period or 960 paid hours in 2 consecutive control periods

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# Eligible Employees, 2

- Limited Term, TAU or Emergency Appointments of more than 6 months and:
  - Half time or more

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# Ineligible Employees

- Employees whose appointment is:
  - Limited Term, TAU, or Emergency Appointments of 6 months or less
  - Less than half-time
  - Intermittent, other than Permanent Intermittent

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# Dependent Eligibility

- Spouses / Registered Domestic Partners are eligible
- Children:
  - Natural / Adopted
  - Step-Children / Domestic Partner Children
  - Disabled Adult Dependent Children
  - Parent-Child Relationships (PCR)

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# Health Benefit Plan Enrollment Form for Active Employees (CalPERS HBD – 12)

Required to:

- Enroll
- Add/Delete Dependents (Circular Letter #600-060-10)
- Change Health Plans
- Cancel coverage
- Decline coverage

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# **Dependent Eligibility Verification Checklist (CalHR Form 781)**

Required to:

- Verify dependents are eligible for health, dental, and premier vision benefits before enrollment
- Perform the triennial re-verification of dependents
- Annually recertify parent-child relationships (PCR)

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# Required Enrollment Documents and Information

- CalPERS Circular Letter #600-045-12
- CalPERS State Health Benefits Guide
- CalHR Health Benefits Policy Statement
- Dependent Eligibility Verification Checklist (CalHR 781)

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# Ineligible Dependents

- Former spouses and former registered domestic partners are not eligible (even if a court orders the employee to provide health coverage)
- Children age 26 and older
- Disabled adult children not enrolled and disabled prior to age 26

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# Ineligible Dependents, 2

- Grandchildren, grandparents, parents, aunts, uncles, nieces, nephews, etc.
- Foster children, including as PCR per CA Code of Regulations §599.500(o)
- Spouses/domestic partners of adult children

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# Ineligible Dependents, 3

- Live-in boyfriend/girlfriend and his/her children
- Anyone already enrolled in a CalPERS health plan on their own or as another subscriber's dependent

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# Disabled Adult Dependent Child

- Employee's disabled adult children—
  - Must be incapable of self-support due to a mental or physical condition
  - Must be enrolled before age 26

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# Disabled Adult Dependent Child, 2

- Employee mails to CalPERS for approval:
  - “Member Questionnaire for the CalPERS Disabled Dependent Health Benefit,” HBD-98
  - “Medical Report for the CalPERS Disabled Dependent Benefit,” HBD-34

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# Disabled Adult Dependent Child 3

Initial certification of disabled adult dependent child must be:

- Within 60 days before and 60 days after child's 26th birthday (employee and child currently enrolled)

**Or**

- Within 60 days of newly eligible employee's initial health enrollment

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# PCR Eligibility

- Children up to age 26 for whom employee has:
  - “assumed a parent-child relationship. . . by intentional assumption of parental status, or assumption of parental duties”
  - [CA Code of Regulations §599.500(o)]

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# PCR Eligibility Procedure

- Employee must complete Affidavit of Parent-Child Relationship (HBD-40) and provide documentation showing a current parent-child relationship
- HR Manager and Health Benefits Officer must sign Affidavit

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# Enrolling PCR Child Under Age 19

Employee submits:

- A copy of the first page from the previous tax year's income tax return, showing child is a dependent
- OR
- Court order with employee as legal guardian
- Bank, credit card, tuition or insurance statement, Bills or mail indicating common residency
- School records

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# Re-certifying PCR Child Under Age 19

Employee **must** submit a copy of the first page from the previous tax year's income tax return, showing child is a dependent.

Go in to [my|CalPERS](#) to re-certify.

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# Enrolling and Re-certifying PCR Child, Age 19 to 26

Employee submits:

- A copy of the first page from the previous tax year's income tax return, showing child is a dependent

**OR**

- Other documentation showing child is financially dependent, provided that the child:
  - Lives with employee for more than 50 percent or is a full-time student, **AND**
  - Is more than 50 percent dependent upon employee

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# PCR Annual Recertification

- Annual Recertification Required (Circular Letter 600-008-15)
- Employee must submit a new affidavit (HBD-40) and documentation showing current parent-child relationship
- HR Manager and Health Benefits Officer must sign Affidavit
- CalHR Form 781

# Dependent Re-Verification (DRV) 1

The eligibility of dependents will be re-verified once every three years, based on the employee's birth month.

Re-Verification Year	2018	2019	2020	2021	2022	2023
Employee Birth Month	Apr Jul Oct	Feb May Aug Nov	Mar Jun Sep Dec	Jan Apr Jul Oct	Feb May Aug Nov	Mar Jun Sep Dec

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# Dependent Re-Verification (DRV) 2

Government Code section 22843.1

California Code of Regulations 599.855

CalHR HR Manual, Policy Statement #1424

90, 60, 30 calendar days before the employee's birth month, CalPERS will send a letter to the employee, providing:

- The re-verification due date
- A list of the enrolled family members requiring re-verification
- A description of the acceptable re-verification documents

**Note: The HR office will not receive a copy of this letter.**

# Dependent Re-Verification (DRV), 3

## Dependent Verification End Date Employer Report

This COGNOS report shows lists the employee's dependent(s) requiring re-verification for health benefits, by the selected verification end date.

Subscriber CalPERS ID	Subscriber Last Name	Subscriber First Name	Dependent CalPERS ID	Relationship Type	Dependent Last Name	DependentFirst Name	Verification End Date
154872472	Dove	Jane	46716575641	Spouse	Dove	Mark	1/31/2018
154872472	Dove	Jane	48718754711	Child	Dove	Sara	1/31/2018
167468741	Scott	Paul	89571141022	Spouse	Scott	Ron	1/31/2018

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# Dependent Re-Verification (DRV), 4

- **Dental Benefits**

- BU contracts & State Employees' Dental Care Act mandate that dental benefit eligibility be the same as health.
- Personnel Office must send employee notifications for dependents enrolled in dental, following the same CalPERS schedule. (DRV Toolkit)
- How do you know who is enrolled for state-sponsored dental benefits?

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# Dependent Re-Verification (DRV), 5

- **Dental Benefits**

- STD. 692 to SCO to dis-enroll unverified dependents
- If the employee submits appropriate re-verification documentation at a later date, dependents shall be enrolled on the first of the month following (This will result in a gap in coverage)
- Permitting Event Codes
  - Delete – 13D
  - Re-enroll – 13A

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# Benefit Entitlement

## Government Code section 20128

Notwithstanding any other provision of law, the board may require a member or beneficiary to provide information it deems necessary to determine this system's liability with respect to, and an individual's entitlement to, benefits prescribed by this part.

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# Enrollment

- Self-Only or
- Self and all eligible dependents
- Exceptions:
  - Family member with other (non-CalPERS) coverage
  - Spouse not living with employee
  - Children over 18
  - Family member in military

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# Enrollment, 2

- Enrollment types:
  - New enrollment
  - Open enrollment
  - Special enrollment
  - Late enrollment (HIPAA)

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# New Enrollment

- New hires may enroll within 60 days of their initial qualifying appointment
- Permanent Intermittents may enroll within 60 days after being credited with at least 480 hours in a 6-month control period
- Coverage effective the first of the month following the date HBD-12 and CalHR 781 are received in the personnel office

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# Open Enrollment

- Held each fall for approximately 30 days
- Employees may enroll, change plans, cancel coverage, add, or delete dependents
- Changes effective January 1 (start of new plan year)
- CalPERS issues Circular Letter in summer with open enrollment info & instructions

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# Special Enrollment

- Triggered by permitting events, such as:
  - Marriage
  - Birth (CalPERS Circular Letter #600-007)
  - Adoption or placement for adoption
  - Involuntary loss of other coverage
  - Court-ordered coverage
- Must enroll within 60 days of event
- Effective 1st of the month following

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# Late Enrollment (HIPAA)

- Outside of open enrollment or more than 60 days following permitting event
- 90-day waiting period
- Coverage effective 1st of the month following 90-day waiting period
- Reference CalPERS Circular Letter #600-007

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# Transactions

- Mandatory
- Permissive
- Health Plan Changes
- Prohibited Transactions

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# Mandatory Transactions

- Additions or deletions required by law from:
  - Court-ordered coverage
  - Divorce (deletion of ex-spouse and stepchildren)
  - Death of a family member
  - Dependent reaches age 26
  - Separation from employment or reduction in time base (CalPERS Circular Letter #600-067-10)
  - Birth or adoption

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# Permissive Transactions

- Additions or deletions that are voluntary at the employee's option
- Examples:
  - Child reaches age 18
  - Family member enters or leaves military
  - Family member obtains other coverage (Optional Delete)
  - Custody change for child under age 18

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# Health Plan Changes

- Triggers enabling a plan change:
  - Household move
  - Change in employment location
  - Retirement

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# Prohibited Transactions

- Dual coverage – any individual covered under two CalPERS subscribers at the same time.
- Split enrollments—dependents can't be split between two CalPERS subscribers
- Upon discovery, the employee's health account must be corrected retroactively
- Retroactivity (Circular Letter #600-215-05)

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# Off Pay Status

- Employee may direct pay premiums when off pay status, such as: leave of absence (LOA), pending approval of disability retirement, suspension
- When an employee returns to work: update myCalPERS and schedule resumption of payroll deductions
- CalPERS Circular Letter #600-050-14

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# Employee Must Report Timely

- Marriage/domestic partnership
- Divorce/termination of domestic partnership
- Death of a member/family member
- Change of residential address

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# Divorce or Domestic Partner Termination

- If separated, but still married or in a domestic partnership:
  - Cannot drop minor step-children/DP children
  - If court-orders coverage:
    - If employee is not enrolled, must enroll
    - Health plan must provide coverage where dependent resides
    - If employee refuses, the personnel office administratively enrolls family in PERS Choice

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# Divorce or Domestic Partner Termination, 2

Optional Deletion of Spouse or Domestic Partner:

- Legal separation—provide COBRA to spouse or DP
- Spouse or DP Leaves employee's household (not during a divorce)
  - Form FL-110, Automatic Temporary Restraining Orders (ATROS), restricts deleting spouse before divorce is final

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# Divorce or Domestic Partner Termination, 3

- When divorce is final:
  - Dis-enroll ex-spouse/DP and any step-children or DP children
  - COBRA rights
- A court ordering employee to provide ex-spouse/domestic partner with health coverage does not bind the state to provide it, or make the ex-spouse/domestic partner eligible for state benefits

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# Quiz

## Eligibility

1. Which of the following dependents are eligible for health benefits?
  - a. Grandparent
  - b. Live-in fiancé
  - c. 25 year old child
  - d. Foster child
2. Which of the following people are not eligible for health benefits?
  - a. Permanent Intermittent that worked 470 hours in a control period
  - b. Limited Term/Half Time employee that has a current 12 month position
  - c. Half-Time employee that holds a permanent position
  - d. Full-Time employee in Bargaining Unit 12

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# Quiz, 2

## Permitting Events

3. Which of the following is not a permitting event?
  - a. Domestic partnership
  - b. Voluntary cancelation of coverage
  - c. Birth of a child
  - d. Newly hired employee
  
4. Which of the following is not a permitting event that may prompt an individual to change health plans?
  - a. Household move
  - b. Change in employment location
  - c. Retirement
  - d. In-place promotion

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# Quiz, 3

## Bonus Question

5. How often are open enrollments required per the Public Employees' Medical and Hospital Care Act (PEHMCA)?
- a. Annually
  - b. Once every other year
  - c. Once every three years
  - d. Periodically

# Contact Information

Health Policy Analyst

- Wendy Yang
- [Wendy.yang@calhr.ca.gov](mailto:Wendy.yang@calhr.ca.gov)
- (916) 324-0866

Dependent-Re-verification Program

- [DRV@calhr.ca.gov](mailto:DRV@calhr.ca.gov)